

Orange County Estate Planning Council

2021 Dues Statement

Membership Dues: \$350.00

Dues include bi-monthly dinner meetings and continuing education
(CE credit available for Attorney, CFP®, CPA, CSPG, CTFA, Insurance Professional and Professional Fiduciary)

2021 Meeting Dates: January 26 • March 23 • May 25 • July 27 • September 28 • November 9

Checks should be made payable to: **Orange County Estate Planning Council**

Orange County Estate Planning Council's Membership Year - January 1 through December 31

**RENEW YOUR DUES BY MARCH 1st TO AVOID A \$50 LATE FEE
AND TO BE INCLUDED IN THE 2021 MEMBERSHIP DIRECTORY**

Please forward the dues notice along with your check to address below OR Fax/Email to 858.408.2671 / gjmgmt@yahoo.com with your credit card payment (credit card info on reverse).

Orange County Estate Planning Council

1442 E. Lincoln Ave., PMB 441
Orange, CA 92865-1934

Amount Enclosed: \$ _____

(Dues to OCEPC are not deductible as a charitable contribution, but may be deductible as an ordinary and necessary business expense.)

(Please Print CLEARLY or Type the Following Information)

Member Name: _____

Member Discipline: Associate Attorney CPA Certified Valuation Specialist CLU Fiduciary
 Financial Planner (CFP® and ChFC) Member at Large Planned Giving Specialist

(Please check your discipline)

Firm Name: _____

Mailing Address: _____

City / State: Zip: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

My information remains current as in the 2020 roster ____ Yes ____ No (or) I have made changes ____

CREDIT CARD AUTHORIZATION FORM

1. Amount to be charged: \$ _____

2. Cardholder's Name: (Please Print) _____

If information below is the same as on the reverse side, check here:

3. Email Address to send Charge Receipt: _____

4. Contact Phone Number: _____

Contact name, if different from Cardholder: _____

5. Credit Card Billing Address:

Street Address City State Zip

6. Card Type:

AMEX Card # _____ / _____

o Security Code – 4 digit, front of card _____ Expiration Date

Visa Card # _____ / _____

o Security Code – 3 digit, back of card _____ Expiration Date

MasterCard # _____ / _____

o Security Code – 3 digit, back of card _____ Expiration Date

7. Signature _____ Date _____